



## ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

04/25/94

This is to acknowledge that you have filed a **Notification of Hazardous Waste Activity** for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER -> NJD981134836

FACILITY NAME -> NJ TRANSIT - NEWTON AVENUE GARAGE

MAILING ADDRESS -> 1 PENN PLZ  
NEWARK, NJ 07105-2246

INSTALLATION ADDRESS -> 350 NEWTON AVE  
CAMDEN, NJ 08104

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY  
REGION II  
26 FEDERAL PLAZA  
NEW YORK, NEW YORK 10278

ATTN: AIR & WASTE MANAGEMENT DIVISION, ROOM 1006  
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH  
RCRA NOTIFICATIONS

TO: VALENTE, ELSA  
SR TECH SP  
NJ TRANSIT - NEWTON AVENUE GARAGE  
1 PENN PLZ  
NEWARK, NJ 07105-2246

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved OMB No. 2060-0028 expires 6-31-93  
GSA No. 0246-EPA-07

Please refer to the instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).



**EPA**

# Notification of Regulated Waste Activity

United States Environmental Protection Agency

Date Received  
(For Official Use Only)

JUN 24 1994

(BU)

## I. Installation's EPA ID Number (Mark 'X' in the appropriate box)

☐

A. First Notification

☒

B. Subsequent Notification  
(complete item C)

C. Installation's EPA ID Number

NJD 981134836

## II. Name of Installation (Include company and specific site name)

MJ Transit-Newton Avenue Garage

## III. Location of Installation (Physical address not P.O. Box or Route Number)

Street

350 Newton Avenue

Street (continued)

City or Town

Camden

State

ZIP Code

NJ 08103

County Code

County Name

Camden

## IV. Installation Mailing Address (See Instructions)

Street or P.O. Box

1 Penn Plaza East-Env. Services

City or Town

Newark

State

ZIP Code

NJ 07105-2246

## V. Installation Contact (Person to be contacted regarding waste activities at site)

Name (last)

Valente

(first)

Elsa

Job Title

Sr. Tech Specialist

Phone Number (area code and number)

201-491-7899

## VI. Installation Contact Address (See Instructions)

A. Contact Address  
Location Mailing

B. Street or P.O. Box

☐☒

One Penn Plaza East

City or Town

Newark

State

ZIP Code

NJ 07105-2246

## VII. Ownership (See Instructions)

A. Name of Installation's Legal Owner

MJ Transit Corporation

Street, P.O. Box, or Route Number

1 Penn Plaza East

City or Town

Newark

State

ZIP Code

NJ 07105-2246

Phone Number (area code and number)

201-491-7899

B. Land Type

S

C. Owner Type

S

D. Change of Owner  
Indicator

Yes

No

X

(Date Changed)

Month

Day

Year

ID - For Official Use Only

## VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to Instructions.)

## A. Hazardous Waste Activity

1. Generator (See Instructions)
- ☒ a. Greater than 1000 kg/mo (2,200 lbs.)
- ☐ b. 100 to 1000 kg/mo (220 - 2,200 lbs.)
- ☐ c. Less than 100 kg/mo (220 lbs.)
2. Transporter (Indicate Mode in boxes 1-5 below)
- ☐ a. For own waste only
- ☐ b. For commercial purposes
- Mode of Transportation
- ☐ 1. Air
- ☐ 2. Rail
- ☐ 3. Highway
- ☐ 4. Water
- ☐ 5. Other - specify \_\_\_\_\_
- ☐ 3. Treater, Storer, Disposer (at installation) Note: A permit is required for this activity; see Instructions.
4. Hazardous Waste Fuel
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketers
- ☐ c. Boiler and/or Industrial Furnace
- ☐ 1. Smelter Refractor
- ☐ 2. Small Quantity Exemption
- Indicate Type of Combustion Device(s)
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 5. Underground Injection Control

## B. Used Oil Fuel Activities

1. Off-Specification Used Oil Fuel
- ☐ a. Generator Marketing to Burner
- ☐ b. Other Marketer
- ☐ c. Burner - Indicate device(s) - Type of Combustion Device
- ☐ 1. Utility Boiler
- ☐ 2. Industrial Boiler
- ☐ 3. Industrial Furnace
- ☐ 2. Specification Used Oil Fuel Marketer (or On-site Burner) Who First Claims the Oil Meets the Specification

## IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable (D001)
2. Corrosive (D002)
3. Reactive (D003)
4. Toxicity Characteristic (D000)

☒☐☐☒

0009

(List specific EPA hazardous waste numbers for the Toxicity characteristic container number)

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See instructions if you need to list more than 12 waste codes.)

|   |   |   |    |    |    |
|---|---|---|----|----|----|
| 1 | 2 | 3 | 4  | 5  | 6  |
|   |   |   |    |    |    |
| 7 | 8 | 9 | 10 | 11 | 12 |
|   |   |   |    |    |    |

C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number. See instructions.)

|       |       |       |   |   |   |
|-------|-------|-------|---|---|---|
| 1     | 2     | 3     | 4 | 5 | 6 |
| X 721 | X 722 | X 725 |   |   |   |

## X. Certification

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature *ARIGINAL**EPA Valente*

Name and Official Title (type or print)

*EPA Valente Sr. Tech. Specialist*

Date Signed

*Jan 14, 1994*

## XI. Comments

*Please change the name of the installation to: NJ Transit Newton Avenue Garage*

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

# FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: December 31, 2013 - 2:50 PM

Version 5.0

## User Selection Criteria

|                               |                                       |                               |             |
|-------------------------------|---------------------------------------|-------------------------------|-------------|
| <b>Location:</b>              | New Jersey, all activities            | <b>Activity Location:</b>     | None Chosen |
| <b>Handler ID:</b>            | NJD981134836                          | <b>Group of IDs:</b>          | None Chosen |
| <b>Handler Name:</b>          |                                       |                               |             |
| <b>Handler Universe:</b>      | All Facilities Regardless of Universe |                               |             |
| <b>Determined Date Range:</b> | From: 10/01/1980 To: 12/31/2013       |                               |             |
| <b>Location County Code:</b>  | None Chosen                           | <b>Evaluation Type:</b>       |             |
| <b>Location City:</b>         |                                       | <b>Focus Area:</b>            |             |
| <b>Location Zip Code:</b>     |                                       | <b>Violation Type:</b>        |             |
| <b>State District:</b>        | None Chosen                           | <b>Display Code Descrip.:</b> | Yes         |
| <b>Sort Order:</b>            | Region, State, Handler Name           | <b>Display Universes:</b>     | Yes         |

## Results

Data meeting the criteria you selected follows.

Total Pages: 4      Total Handlers: 1

## Report Description

This report presents available information from the Resource Conservation and Recovery Act Information System (RCRAInfo) about compliance evaluations, violations, and enforcement actions meeting the criteria supplied by the user. Evaluations showing no violations does not always indicate that no violations were determined. Violation without enforcement actions does not always mean no enforcement action will be issued. In order to avoid releasing enforcement sensitive information to the public the following information is not shown on the report: pending civil / judicial referrals, criminal actions and referrals, and State to EPA referrals; all other enforcement actions are released.

## Report Information

|                      |   |
|----------------------|---|
| <b>Name:</b>         | cme_foia.rtf  |
| <b>Developed by:</b> | EPA Headquarters, Office of Enforcement and Compliance Assurance      |
| <b>Deployed:</b>     | June 2006   |
| <b>Last Updated:</b> | May 2012  |
| <b>Contact:</b>      | rcrainfo.help@epa.gov   |
| <b>Tables Used:</b>  | cmecomp3, citation3, hreport_univ5, lu_citation, lu_state, hid_groups |
| <b>Libraries:</b>    | none  |

# FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: December 31, 2013 - 2:50 PM

|   |  |  |  |  |  |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |                           |  |  |  |  |  |  |  |  |  |                         |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|------------------------------------|--|--|--|--|--|--|--|--|--|---------------------------|--|--|--|--|--|--|--|--|--|-------------------------|--|--|--|--|--|--|--|--|--|-------------------------------|--|--|--|--|--|--|--|--|--|----------------|--|--|--|--|--|--|--|--|--|---------------------|--|--|--|--|--|--|--|--|--|
| NJ TRANSIT - NEWTON AVENUE GARAGE               |  |  |  |  |  |  |  |  |  | County Name / Code: CAMDEN / NJ007 |  |  |  |  |  |  |  |  |  | NJD981134836              |  |  |  |  |  |  |  |  |  |                         |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
| Location: 350 NEWTON AVE; CAMDEN, NJ 08103-1612 |  |  |  |  |  |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  | REGION 02                 |  |  |  |  |  |  |  |  |  |                         |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
| Mailing: 1 PENN PLZ; NEWARK, NJ 07105-2246      |  |  |  |  |  |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |                           |  |  |  |  |  |  |  |  |  |                         |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
| Activity Location: NJ                           |  |  |  |  |  |  |  |  |  | State District: SOUTHERN           |  |  |  |  |  |  |  |  |  | Accessibility:            |  |  |  |  |  |  |  |  |  | Non-Notifier:           |  |  |  |  |  |  |  |  |  | Extract Flag: Y               |  |  |  |  |  |  |  |  |  | Active Site: N |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
| Generator: N                                    |  |  |  |  |  |  |  |  |  | Transporter: N                     |  |  |  |  |  |  |  |  |  | Operating TSDF: -----     |  |  |  |  |  |  |  |  |  | IC In Place: N          |  |  |  |  |  |  |  |  |  | EI Indicator (HE / GW): N / N |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
| Short-Term Gen: N                               |  |  |  |  |  |  |  |  |  | Transfer Facility: N               |  |  |  |  |  |  |  |  |  | Offsite Receiver: N       |  |  |  |  |  |  |  |  |  | HSM: N                  |  |  |  |  |  |  |  |  |  | Subpart K: -----              |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
| Full Enforcement: -----                         |  |  |  |  |  |  |  |  |  | Converter: -----                   |  |  |  |  |  |  |  |  |  | State Unaddressed SNC: N  |  |  |  |  |  |  |  |  |  | EPA Unaddressed SNC: N  |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
| CA Wtkld: N                                     |  |  |  |  |  |  |  |  |  | State TSDF: -----                  |  |  |  |  |  |  |  |  |  | State Addressed SNC: N    |  |  |  |  |  |  |  |  |  | EPA Addressed SNC: N    |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
| Active State Gen: N                             |  |  |  |  |  |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  | State SNC w/Comp Sched: N |  |  |  |  |  |  |  |  |  | EPA SNC w/Comp Sched: N |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
| Evaluations With No Violations:                 |  |  |  |  |  |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |                           |  |  |  |  |  |  |  |  |  |                         |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
| CEI Evaluation 02/18/2011                       |  |  |  |  |  |  |  |  |  | Activity Location: NJ              |  |  |  |  |  |  |  |  |  | By: State                 |  |  |  |  |  |  |  |  |  | Identifier: 001         |  |  |  |  |  |  |  |  |  | Person: SOTF                  |  |  |  |  |  |  |  |  |  | Branch: S      |  |  |  |  |  |  |  |  |  | Found Violation: NO |  |  |  |  |  |  |  |  |  |
| Citizen Complaint: NO                           |  |  |  |  |  |  |  |  |  | Multimedia Inspection: NO          |  |  |  |  |  |  |  |  |  | Sampling: NO              |  |  |  |  |  |  |  |  |  | Not Subtitle C: NO      |  |  |  |  |  |  |  |  |  | Day Zero: 02/18/2011          |  |  |  |  |  |  |  |  |  | Focus Area:    |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
| Total Number of Handlers:                       |  |  |  |  |  |  |  |  |  | 1                                  |  |  |  |  |  |  |  |  |  |                           |  |  |  |  |  |  |  |  |  |                         |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
| Total Number of Activity Locations:             |  |  |  |  |  |  |  |  |  | 1                                  |  |  |  |  |  |  |  |  |  |                           |  |  |  |  |  |  |  |  |  |                         |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |
| * End of Report *                               |  |  |  |  |  |  |  |  |  |                                    |  |  |  |  |  |  |  |  |  |                           |  |  |  |  |  |  |  |  |  |                         |  |  |  |  |  |  |  |  |  |                               |  |  |  |  |  |  |  |  |  |                |  |  |  |  |  |  |  |  |  |                     |  |  |  |  |  |  |  |  |  |

\* Note: Penalty amount may not reflect all violations cited.

# FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: December 31, 2013 - 2:50 PM

## Description of codes used on the report:

| Universes                        | Description of Universes  |
|----------------------------------|---|
| <b>Generator</b>                 | Indicates that the facility is a Large Quantity Generator (LQG), Small Quantity Generator (SQG), Conditionally Exempt Small Quantity Generator (CEG), or not a generator (N).   |
| <b>Transporter</b>               | Indicates that the facility Transports waste subject to RCRA regulations. ('Y' indicates that the facility is in this universe).  |
| <b>Operating TSDF</b>            | Indicates that the facility is a Treatment, Storage or Disposal facility subject to any type of enforcement. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)   |
| <b>IC in Place</b>               | Indicates that the facility has Institutional Controls in place. ('Y' indicates that the facility is in this universe).   |
| <b>EI Indicator (HE / GW)</b>    | Indicates that the facility has controls in place for Environmental Indicators.<br>HE - Human Exposures ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control;<br>'N' indicates the exposure does not exist)<br>GW - Groundwater Release ('+' indicates the exposure exists and is under control; '-' indicates the exposure exists and is not under control;<br>'N' indicates the exposure does not exist) |
| <b>Short-Term Gen</b>            | Indicates that the facility is a short term or one time event generator and not generating from ongoing processes.  |
| <b>Transfer Facility</b>         | Indicates that the facility transfers hazardous waste.  |
| <b>Offsite Receiver</b>          | Indicates that the facility, whether public or private, currently accepts hazardous waste from another site (site identified by a different EPA ID).  |
| <b>HSM</b>                       | Indicates that the facility manages hazardous secondary material(s) (e.g. spent material, by-product or sludge) that when discarded, would be identified as hazardous waste.  |
| <b>Subpart K</b>                 | Indicates that the facility has opted into the subpart K laboratory rule. It then specifies the type of facility (C - College or University; H - Teaching Hospital; N - Non-profit Research Institute; W - withdrawal from the rule)  |
| <b>Full Enforcement</b>          | Indicates that the facility is a Treatment, Storage or Disposal facility which is part of the Full Enforcement universe. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)   |
| <b>CA Workload</b>               | Indicates that the facility is part of the Corrective Action Workload universe. ('Y' indicates that the facility is in this universe).  |
| <b>Active State Gen</b>          | Indicates that the facility is an Active State Generator. ('Y' indicates that the facility is in this universe).  |
| <b>Converter</b>                 | Indicates that the facility is a Converter Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)  |
| <b>State TSDF</b>                | Indicates that the facility is a State Treatment, Storage or Disposal facility. It then specifies the type of facility (L - Land Disposal; I - Incinerator; B - BIF; S - Storage; T - Treatment)  |
| <b>State Unaddressed SNC</b>     | Indicates that the facility is a State Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).   |
| <b>State Addressed SNC</b>       | Indicates that the facility is a State Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).   |
| <b>State SNC w/ Compl. Sched</b> | Indicates that the facility is a State Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).  |
| <b>EPA Unaddressed SNC</b>       | Indicates that the facility is an EPA Unaddressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).  |
| <b>EPA Addressed SNC</b>         | Indicates that the facility is an EPA Addressed Significant Non-Complier. ('Y' indicates that the facility is in this universe).  |
| <b>EPA SNC w/ Compl. Sched</b>   | Indicates that the facility is a EPA Significant Non-Complier with a Compliance Schedule. ('Y' indicates that the facility is in this universe).  |

\* Note: Penalty amount may not reflect all violations cited.

# FOIA Report of Non-Sensitive Compliance Monitoring and Enforcement Data

Report run on: December 31, 2013 - 2:50 PM

## Description of codes used on the report:

**ACCESSIBILITY** - indicates the reason why the handler is not accessible for normal RCRA tracking and processing (previously called Bankrupt Indicator):

| Code | Description   |
|------|---|
| B    | indicates that the handler has filed for bankruptcy and bankruptcy litigation is in process.  |
| C    | indicates that all RCRA responsibilities for permitting/closure, corrective action, and compliance monitoring and enforcement at the facility have been formally transferred to the CERCLA program or state equivalent. |
| F    | indicates that all responsible parties (owners/operators) for the handler have fled the country or are otherwise not available for prosecution.   |
| L    | indicates that the handler's case is tied up in litigation to the extent that further progress in achieving RCRA compliance through normal enforcement is not possible.   |

**NON-NOTIFIER** - indicates that the handler has been identified through a source other than Notification and is suspected of conducting RCRA-regulated activities without proper authority:

| Code | Description  |
|------|--|
| E    | indicates that the handler was initially a non-notifier, subsequently determined to be exempt from requirements to notify. |
| O    | indicates that the handler is a former non-notifier.   |
| X    | indicates that the handler is a non-notifier.  |

| Evaluation Type | Type Description                         |
|-----------------|--|
| CEI             | COMPLIANCE EVALUATION INSPECTION ON-SITE |

\* Note: Penalty amount may not reflect all violations cited.